

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4618).</b>		<b>Complete if Known</b>	
<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">For FY 2009</h2>		Application Number	10/535,508-Conf. #7230
		Filing Date	December 16, 2005
		First Named Inventor	Roberto Angelo Motterlini
		Examiner Name	A. Soroush
		Art Unit	1616
		Attorney Docket No.	H0817,70001US00
<input checked="" type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27		
TOTAL AMOUNT OF PAYMENT		(\$)	715.00

<b>METHOD OF PAYMENT (check all that apply)</b>				
<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input type="checkbox"/> Deposit Account	Deposit Account Number <b>23/2825</b>	Deposit Account Name <b>Wolf, Greenfield &amp; Sacks, P.C.</b>		
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments		

<b>FEE CALCULATION</b>								
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>								
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>			
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	<b>Fees Paid (\$)</b>	
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		
							<b>Small Entity Fee (\$)</b>	
							<b>2. EXCESS CLAIM FEES</b>	
							<b>Fee (\$)</b>	
Each claim over 20 (including Reissues)							52	
Each independent claim over 3 (including Reissues)							220	
Multiple dependent claims							390	
							<b>Small Entity Fee (\$)</b>	
							<b>Fee (\$)</b>	
<b>Total Claims</b> <b>Extra Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b>							<b>Multiple Dependent Claims</b>	
- 20 or HP = _____ x _____ = _____							<b>Fee (\$)</b> <b>Fee Paid (\$)</b>	
HP = highest number of total claims paid for, if greater than 20.								
<b>Indep. Claims</b> <b>Extra Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b>								
- 3 or HP = _____ x _____ = _____								
HP = highest number of independent claims paid for, if greater than 3.								
<b>3. APPLICATION SIZE FEE</b>								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>			<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>		
- 100 = _____	/50 = _____	(round up to a whole number) x _____			= _____			
<b>4. OTHER FEE(S)</b>								
Non-English Specification, \$130 fee (no small entity discount)							310.00	
Other (e.g., late filing surcharge): 2253 Three month extension (less 2 months previously paid with response filed on 9/28/09)							310.00	
2801 RCE – Request for Continued Examination							405.00	

<b>SUBMITTED BY</b>			
Signature	/C. Hunter Baker/	Registration No. (Attorney/Agent)	46,533
Name (Print/Type)	C. Hunter Baker, M.D., Ph.D.	Telephone	617.646.8000
		Date	October 28, 2009

<b>Certificate of Electronic Filing Under 37 CFR 1.8</b>	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.8(a)(4).	
Dated: October 28, 2009	Electronic Signature for Daniel S. Peters: /Daniel S. Peters/